

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) Kentucky Tomorrow, Inc. | | FEC IDENTIFICATION NUMBER ▼ C C00622415 | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|---|--------------------|---|---|
| Full Name of Payee Facebook | | Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016 | |
| Mailing Address 1 Hacker Way | | Amount 1002.85 | |
| City Menlo Park | State CA | Zip Code 94025 | Transaction ID : SE.4106 Date of Disbursement or Obligation MM / DD / YYYY 08 / 10 / 2016 |
| Purpose of Expenditure Advertising - Facebook | | Category/Type 004 | |
| Name of Federal Candidate DONALD J TRUMP | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 1002.85 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------|---|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY | |
| Mailing Address | | Amount | |
| City | State | Zip Code | Date of Disbursement or Obligation MM / DD / YYYY |
| Purpose of Expenditure | | Category/Type | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 1002.85 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 1002.85 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jennifer N. Krantz
[Electronically Filed]

Date

 MM / DD / YYYY
08 / 11 / 2016

Signature